



Green Energy Fund ARRA Relief Program Grant Application

Division of Energy and Climate - Delaware Energy Office
1203 College Park Drive, Suite 101, Dover, DE 19904
Phone: (302) 735 - 3480 & Fax (302) 739 - 1840

Solar Water Heating

Non-Residential Applicants

Applicant Information

Company Name:	Energy Audit Attached (required for all applicants): []	
Email:		
Daytime Phone:	Evening Phone:	
Installation Address:		
City:	State:	Zip code:
Mailing Address:		
City:	State:	Zip code:
Electric Utility:	Last 12 Months:	KWH usage

Rebate Designee: (If other than applicant)

Name / Company:		
Email:		
Daytime Phone:	Evening Phone:	
Mailing Address:		
City:	State:	Zip code:

Contractor:

Name / Company:	DE Business License #
Email:	
Daytime Phone:	
Mailing Address:	
City:	State: Zip code:

Licensed Installation Professional (Electrician, Plumber, HVAC Contractor)

Name:	DE Business License #
Email:	Professional License #
Daytime Phone:	Professional License Issuing State:
Mailing Address:	
City:	State: Zip code:



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Applicant Information

Company Name: _____

System Characteristics

Primary Purpose:	<input type="checkbox"/> Solar Water Heating	<input type="checkbox"/> Space Heating
Installation type: Check one	<input type="checkbox"/> New Construction	<input type="checkbox"/> Existing Construction <input type="checkbox"/> Replacement
System Type: Check one	<input type="checkbox"/> Drain Back	<input type="checkbox"/> Thermosyphon <input type="checkbox"/> Glycol
Installation type: (Check one)	<input type="checkbox"/> Rooftop	<input type="checkbox"/> Ground mount <input type="checkbox"/> Tracking
SRCC OG-300 Reference #	SRCC OG -300 Annual Energy Savings:	
Array Orientation:	degrees	Array Tilt: degrees
Collector Manufacturer:	Collector Model #	
Total Collector Area:	ft2	
Tank Manufacturer:	Volume:	Gallons
Tank Model #		
Auxiliary Tank Manufacturer:	Volume:	Gallons
Controller Manufacturer:	Model #	
Pump Brand:	Model #	
Heat Exchanger:	Model #	

System Cost

Material Cost:	Permits:	
Labor Cost:	Other Fees:	Total System Cost:

Rebate Calculation: Grants may not exceed the Grant Cap

OG300 / Estimated KW/Hr. Saved _____

Rebate : \$1.00 per KW/Hr. Saved _____

Amount of Rebate Requested: _____

Solar Rating & Certification Corporation (SRCC) provides predicted KW per hour saved on their website for OG300 Systems

Grant Application Declaration of Understanding - I understand and agree that:

- 1) the information provided on this form is true and correct to the best of my knowledge
- 2) the State of Delaware and its agents provide no warranty for this system
- 3) all warranties are provided by the installing contractor and shown on the final invoice as minimum 5 years parts and labor
- 4) my renewable energy system may be subject to inspection by the state or its agents prior to or after grant payment
- 5) I must comply with all ARRA Relief Program rules and requirements to be eligible for funding
- 6) I must complete an energy audit through Energize Delaware and energy efficiency improvements valued at a minimum of 10% of the value of my ARRA Relief Program grant incentive in order to be eligible for funding
- 7) my installer MUST complete the Renewable Energy Job Hours Reporting Worksheet when installation is complete and this form must be submitted with final grant documentation in order to be eligible for ARRA Relief Program funding
- 8) I will not receive grant payment until Energize Delaware approves my energy efficiency improvements
- 9) my project must comply with federal Davis Bacon Act prevailing wage requirements and other ARRA requirements
- 10) If I choose not to complete the ARRA Relief Program requirements I will be required to resubmit an application for the traditional Green Energy Program funds offered through my electric utility
- 11) my application must be submitted to the Green Energy Program Team by November 1, 2011 to be eligible for funding and the installation of my system must be completed and all final application materials **must be submitted by March 1, 2012.**

Signatures

Purchaser

Contractor

Printed Name: _____

Printed Name: _____

Signature : _____

Signature: _____